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TO:

Mail Stop Issue Fee

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The required fees have been authorized to be charged to Deposit Account 502464.

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Facsimile Cover Sheet (1 pg.) PTOL-85 PART B-FEE(S) TRANSMITTAL (2 pgs., original + 1 copy) PTO/SB/81 Power of Attorney and Correspondence Address Indication Form (1 pg.) PTO/SB/96 Statement Under 37 CFR 3.73(b) (1 pg.)

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